Y.E.S!
Youth Empowerment Summit 2019

2019 Application Packet
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Dear Parents/Guardians of Future Y.E.S! Participants,

Please allow me to introduce myself, my name is De’Lasha Singleton and I am the director of the 2019 Youth Empowerment Summit (Y.E.S!) Program. National Black Deaf Advocates (NBDA) and Youth Empowerment Summit (Y.E.S!) are proudly announcing that our 26th Y.E.S! Program will be held during 2019 NBDA Conference Week in Oakland, CA on Monday, July 29, 2019 to Sunday, August 4, 2019!

NBDA is a non-profit organization that founded in 1982 where has enriched the lives of Deaf and Hard of hearing African-Americans through advocacy for educational, economic, social, and political advancement. During the conference week, there will be a lot of educational workshops, social, entertainment night, banquet include several programs like Collegiate Black Deaf Students Leadership Institute (CSBDSL1) and Youth Empowerment Summit (Y.E.S!).

According to Y.E.S! Program, it was founded at 1997 NBDA conference in Washington, D.C. where were designed for Black Deaf and Hard of Hearing youths from 13 to 17 years old to promote their leadership skills, non-academic educational, and social needs to accomplish their dream and contribute back to the communities. It turned out a successful program has foster leadership development for more than 200 Black Deaf and Hard of Hearing youths across the country by providing the importance, workshops, leadership training/development, exposure to Black Deaf role models and challenging activities. Upon the conclusion of participating in the 2019 Y.E.S! Program, the youths will gain experience of overcoming adversity and common issues that minority students constantly face in America. We anticipate having 40 to 50 youth participants for this upcoming 2019 NBDA conference week. In addition, we are expecting to staff this program with Black Deaf and Hard of Hearing Peer Advisors, in the between of age 21 to 35, to supervise Y.E.S! participants throughout the program and serve their best needs. Also, Peer Advisors will advocate Y.E.S! participants as their role model and help to enrich their Black Deaf experience.

In this application packet, it contains the tentative agenda, fees, travel transportation, application form, authorization for emergency medical treatment form, parental contest form and code of conduct form. If you are interested in sending your child(ren) to the 2019 Y.E.S! Program or if there are any questions about the program, please e-mail me at youth@nbda.org.

Gratefully,

De’Lasha Singleton, 2019 Y.E.S! Program Director
Training Topics

During the NBDA’s 29th National Conference week, Youth Empowerment Summit, Program will provide educational workshops, trainings and activities from Monday, Jul 29th, 2019 to Sunday, August 4th, 2019 that will discuss on several important topics that help the participants to have a better understanding of their possibility/abilities, the reality to address, their passion to achieve, and self-motivation to promote include educating others by finding it as the exposure with the group of same ages/interests include staff and Black Deaf role models/leaders such as:

- Advocacy & Self-Advocacy Training
- Career Goals
- Community Service
- Conflict Resolution
- Effective Communication Skills
- Foot Map Activity: Level of Class Status (Race, Job, Background and Culture)
- Leadership Network & Styles
- Personal/Professional Guidance Achievements
Tentative Agenda

This agenda allows you to get idea what will occur during the conference week but it is subject to change.

- **Monday, July 29**
  - Y.E.S! Participants Check In *(at California School for the Deaf Fremont before noon)*
  - Y.E.S! Welcome Reception
  - Y.E.S! Educational Workshops & Activities

- **Tuesday, July 30**
  - Y.E.S! Educational Workshops & Activities
  - Group Rehearsal for NBDA’s Welcome Ceremony
  - Group Interaction with NBDA Officers, Representatives, and Board Members

- **Wednesday July 31**
  - Y.E.S! Performance *(at NBDA’s Welcome Ceremony)*
  - Y.E.S! Educational Workshops & Activities
  - Educational Activity (Black Deaf History)
  - Family Fun/Game Night *(at Oakland Marriott City Center)*

- **Thursday August 1**
  - Y.E.S! Educational Workshops & Activities
  - Field Trip
  - Entertainment Night *(at Oakland Marriott City Center)*

- **Friday August 2**
  - Y.E.S! Educational Workshops & Activities
  - Exhibit Hall
  - Fellowship with Black Deaf and Hard of Hearing College Students
  - Entertainment Night *(at Oakland Marriott City Center)*

- **Saturday August 3**
  - NBDA General Meeting & Election
  - NBDA Conference Banquet & Awards
  - Y.E.S! Group Performance at NBDA Conference Banquet & Awards *(at Oakland Marriott City Center)*

- **Sunday, August 4**
  - Y.E.S! Participants Check out *(at University of California, Berkeley)*

***Note: Agenda is subject to change***
Fees

Many Black Deaf youths are from the lower income bracket and may not be financially able to cover the Y.E.S! fees. That should not deter their hopes of participating in Y.E.S.! In the past, through fund raising projects and donations, some schools have elected to sponsor several applicants (students) to the Y.E.S! Program. We hope you will be able to request for the sponsorship from school or explore a wide variety of sponsors that will help cover the expenses.

The total fee for the 2019 Y.E.S! will be $650 which covers registration fee, application fee, lodging, scheduled meals, field trips, t-shirt, educational workshops and activities, and the NBDA Conference Banquet. In addition, the applicant will be responsible for their own transportation arrangements (see next page). The deadline for the applicant packet (all forms) with the $650 total fee is on June 14, 2019 which will be accepted with cashier’s check or money order (please write “National Black Deaf Advocates, Inc.” in “to” on the check or money order). Please write memo: Youth Empowerment Summit. For purchase order, please contact us at youth@nbda.org. Online payment is available, please contact webmaster@nbda.org to arrange online payment. Please mail cashier’s check, money order or purchase order to National Black Deaf Advocates, Inc., P.O. BOX 417515 Sacramento, CA 95841. No refunds after June 14, 2019.

| Application | $50 |
| Registration | $130 |
| Y.E.S! Leadership Program Activities | $120 |
| Dorm, Meals, & Ground Transportation | $350 |
| **Total cost** | **$650** |

Note: The total cost does not include transportation to Oakland, CA

Please circle that will cover the Y.E.S! fees ($650) below:

- School (Name of Contact & Email or Phone ____________________________)
- Parents (Name of Contact & Email or Phone ____________________________)
- Sponsor (Name of Contact & Email or Phone ____________________________)
- Other (Name of Contact & Email or Phone ____________________________)

____________________________________________________________________________________
Travel Transportation (Airlines & Services)

- JetBlue Airways: [www.jetblue.com](http://www.jetblue.com) or 718-286-7900
- Southwest Airlines: [www.southwest.com](http://www.southwest.com) or 800-IFLY-SWA (1-800-435-9792)
- United Airlines: [www.united.com](http://www.united.com) or 1-800-864-8331
- American Airlines: [www.aa.com](http://www.aa.com) or 1-800-433-7300
- Delta: [www.delta.com](http://www.delta.com) or 1-800-221-1212
- US Airways: [www.usairways.com](http://www.usairways.com) or 1-800-928-4322
- Amtrak: [www.amtrak.com](http://www.amtrak.com) or 727-540-0034
- Greyhound Bus: [www.greyhound.com](http://www.greyhound.com) at Union Terminal in Central
- Megabus: [www.megabus.com](http://www.megabus.com) or 1-877-462-6354
- Google Flights: ([www.google.com/flights](http://www.google.com/flights) is a great link to check for cheaper airfare, suggest purchase one way each instead round trip).

**Note:** Please be aware of some airlines that charge 1st and/or 2nd luggage (and carry-on baggage may be charged as well). Otherwise, the participant(s) can able to carpool with other attendant(s) or being picked up by Y.E.S! Director/Peer Advisor from the airport, train or bus stop. The nearest airport we can able to pick up is Oakland International Airport. Please contact De’Lasha Singleton at youth@nbda.org for the participant’s confirmation ticket (travel information).
Application

Please write or type in blue or black ink/color which will be accepted.

General Information

First Name: __________________________  Last Name: _______________________________
Address: ______________________________________________________________________
City: __________________________________  State: _____  Zip Code: ____________
Phone Number: __________________________  Home  Text  Work  VP
Email Address: __________________________
Birth Date: _________________  Your age on 7/31/2019: __________________
High School: __________________________________________
Class of Year: ____________________  High School Graduation Date: ________________
Communication Method (please circle):
   ASL  PSE  SEE  Oral  Other: __________________________
Disability: __________________________  Accommodation: __________________________
T-Shirt Size:  S  M  L  XL  XXL

Parent’s/Guardian’s Information

Full Name: ____________________________________________________________________
Home Phone Number: __________________________  Voice  TTY  VP
Work Phone Number: __________________________  Text Number: _______________________
E-mail: _____________________________________________________________________
Medical Information
The participant’s medical information is confidential.

First Name: __________________________  Last Name: _______________________________

Physician: _____________________________________________________________________

Telephone Number: ____________________________________________________________

Emergency Family Member Name: _________________________________________________

Emergency Family Member’s Telephone Number: ____________________________________

What is your relationship to this Emergency Family Member? _______________________

Your current medical condition: __________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Are you taking any prescription(s)?  YES  NO

If yes, please name the medication(s) you are taking: __________________________________
______________________________________________________________________________
______________________________________________________________________________

Any restriction diets or allergies (please describe)?:  __________________________________
______________________________________________________________________________
______________________________________________________________________________

Health Insurance Carrier: _________________________________________________________

Health Insurance ID Number: ______________________________________________________

Group Number: __________________________________________________________________

(See next page)
Have you ever been told that you had one of the following *(please circle)*?

- Asthma
- High Blood Pressure
- Heart Trouble
- Lung Disorder
- Diabetes
- Nervous Disorder
- Abdominal Disorder
- Arthritis
- Disease of the Kidney
- Disease or Disorder of the Digestive Tract

Any life-threatening conditions *(please describe)*?

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Are there any concerns that we should be aware of?

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
Authorization for Emergency Medical Treatment

I have listed above my or my child’s physical conditions or medical problems that may need attention and all medications regularly used by myself or said by the minor. I understand the failure to disclose medical information/condition may result in dismissal from Youth Empowerment Summit. In case of the illness of my child, Youth Empowerment Summit will try to notify whoever is listed as the emergency contact person. In the event where arises a medical emergency concerning myself or my child, at a time where the emergency contact cannot be notified, I authorize Youth Empowerment Summit to consent to any necessary X-ray examination, anesthetic, medical or surgical diagnosis or treatment or hospital care. I hereby consent and give my permission to the Youth Empowerment Summit Staff(s) or any attending physician to make any decisions and to perform such medical treatments and/or surgery upon my child that may, in their sole discretion, be necessary and proper under the circumstances.

General Release and Waiver of Liability

I DO RELEASE, ACQUIT, DISCHARGE, AND COVENANT TO HOLD HARMLESS YOUTH EMPOWERMENT SUMMIT STAFF, PERSONNEL, OR ANY OF ITS REPRESENTATIVES FROM ANY ACTIONS, DAMAGES, OR LIABILITIES ARISING OUT OF ANY INJURIES OR PROPERTY DAMAGE SUSTAINED DURING THE PARTICIPATION IN THE CAMP AND/OR RESULTING FROM THE TREATMENT OF ANY ILLNESS, SICKNESS, OR ACCIDENT, INCURRED BY MYSELF OR MY CHILD DURING HIS/HER STAY AT YOUTH EMPOWERMENT SUMMIT.

In consideration for being permitted to attend Youth Empowerment Summit and participate in the activities conducted by the Camp, I, on behalf of myself, my child, my legal representatives, heirs and assigns, do hereby release, waive, and forever discharge Youth Empowerment Summit and its officers, employees, volunteers, and agents, of and from any and all loss, damage, claim, demand, action or right of action, of whatever kind or nature, either in law or in equity arising from or by reason of any bodily injury or personal injuries known or unknown, death or property damage resulting or to result from any accident that may occur as a result of my or my child’s participation in the camp activities or any activities in connection with the Youth Empowerment Summit, whether by negligence or not.

I, personally, and on behalf of my child (if child is the camp participant), hereby give Youth Empowerment Summit permission to use my and/or my child’s name, photograph, quotations and likeness in any advertisements or promotions performed in connection with the camp and agree that neither I nor my child shall be entitled to any compensation for such use.

I agree that this release, waiver, and indemnity agreement is intended to be as broad and inclusive, and that if any portion of this agreement is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Parent/Guardian’s Print Name: ____________________________________________________
Parent/Guardian’s Signature: ____________________________________________

Date: ________________________________________________________________
Parental Consent Form

Please print clearly.

I, _______________________________, give my consent for __________________________
to the 2019 Youth Empowerment Summit (Y.E.S!) with the understanding that he or she will be supervised by responsible Peer Advisors trained by the director. I understand that I will pay $600 registration fee in addition to $50 application fee and I understand that Y.E.S! Program cannot be financially responsible for the travel arrangements.

Signature: _______________________________               Date: __________________________

The Code of Conduct

The purpose of the Code of Conduct is to help all participants to ensure and to inform them that they are expected to behave properly and responsibly during the Y.E.S! Program from
July 29, 2019 to August 4, 2019. All participants are required to read, understand, and follow conduct of code while participating in Y.E.S! Program sponsored activities at University of California Berkeley, Oakland Marriott City Center and Oakland, California area. The following rules are designed to ensure a successful experience for all participants. The participant will be removed immediately from the Y.E.S! Program if participant poses a danger to himself/herself or to others, or will be given a warning.

Y.E.S! participants are subject to Oakland, California and federal laws and may be accountable to the city of Oakland and federal justice for any violations of such laws. Y.E.S! participants, who are deemed dangerous to themselves or to others, may be removed immediately from the premises for the period allowed by law.

Y.E.S! participants, who violates any of the following offenses, will be expelled from the Y.E.S! Program immediately as following:

- Any sale, distribution, or exchange of illegal or prescription drugs or alcohol on at any sponsored activities in Oakland, California.
- Any violation of fire safety regulations
  - Arson refers to the crime of intentionally setting fire to California School for the Deaf Formont, University of California, Oakland Marriott City Center or any other properties.
  - Causing a false fire alarm or making bomb threats.
  - Discharging or removing a fire extinguisher.
- Destruction or theft of California School for the Deaf Formont, University of California, Oakland Marriott City Center or any properties.
- Physical assault or threat with intent to do harm including:
  - Actual or threatened physical injury.
  - Forcible or unlawful control over the freedom of movement of any person and/or any other conduct that threatens.
  - Endangers the health and safety of any person on campus or sponsored activities.
- Possession or manufacture of explosive devices or dangerous chemicals.
- Any sexual misconduct including:
  - Sexual acts or penetration by an object, by use of force, placing the victim in fear or harm.
  - Sexual acts or contacts with a person who is unable to appraise the act, or cannot communicate his or her wishes.
- Use, possession, sale, distribution, or exchange of firearms or other dangerous weapons.
- Forced entry into any rooms or properties at California School for the Deaf Formont, University of California, Oakland Marriott City Center.
- Obstruction of any activities.

Participants who violate these following rules will be given a warning; however, if one continues to abuse these rules, he or she may be expelled due to failure to cooperate inconsistently:

- Lack of respect for Y.E.S! staffs, participants, and/or Y.E.S!/NBDA Administration.
- Excessive horse playing that could cause harm to others.
- Disruptive behaviors including:
Acting rude or disrespectful;
- Refusing to cooperate with Y.E.S! staffs or Y.E.S!/NBDA Administration.
- Behaving inappropriately at any Y.E.S! sponsored activities.
- Teasing, insulting, or spreading harmful gossip about others.

- Inappropriate languages or gestures.
- Unauthorized permission without Y.E.S! Staffs.

I have read the Code of Conduct and will comply by these rules. I understand these rules. If I have any questions or concerns, I will contact Y.E.S! Director or Peer Advisors. I understand these rules that have been created to provide for a safe, orderly, and rewarding experience for the National Black Deaf Advocates (NBDA) and Youth Empowerment Summit (Y.E.S!) Program.

Please sign your signature,

X ____________________________________________ Date

2019 Y.E.S! Participant

X ____________________________________________ Date

2019 Y.E.S! Participant’s Parent/Guardian

Thank you so much for reading and/or completing your application, please send an e-mail to De’Lasha Singleton (Y.E.S! Program Director) if you have any questions/concerns at youth@nbda.org.
Friendly Reminder

Please complete:

- $650 total fee
- Fees Form (page 5)
- Application Form (page 7 to 9)
- Authorization for Emergency Medical Consent Form (page 10-11)
- Parent Contest Form (page 12)
- The Code of Conduct Form (page 13-14)

and mail/send **NO LATER THAN June 14, 2019** to:

National Black Deaf Advocate, Inc.
2019 YES Application
P.O. BOX 417515
Sacramento Ca 95841